

Credentialling Midwives

What are the experiences of midwives working in
midwifery-led models of care in NSW who
undertake the credentialling process?

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(Hons) degree

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Certificate of Authorship/Originality

I certify that the work in this thesis has not previously been submitted for a degree nor has it been submitted as part of requirements for a degree except as fully acknowledged within the text.

I also certify that the thesis has been written by me. Any help that I have received in my research work and preparation of the thesis itself has been acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

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Rachel Smith

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Abstract

Title

Credentiailling Midwives: the experiences' of midwives working in midwifery-led models of care in NSW who undertook the credentiailling process.

Background

In 2004, NSW Health issued a Policy Directive that required midwives, who worked in midwifery-led models of care, to undergo a process known as credentiailling. Credentiailling for midwives in NSW involves a four-step process: self-assessment, panel review of midwifery practice, emergency management skills assessment and discussion of a case study from practise. The NSW Midwives Association (NSWMA), a state branch of the national midwifery professional body the Australian College of Midwives (ACM), administers the process. The introduction of credentiailling for midwives in NSW was contentious and there was much debate about the need for credentiailling and its introduction for a specific group of midwives.

Method

This descriptive exploratory study examined the experiences of the midwives who undertook the mandated credentiailling process in NSW. The study collected data through in-depth, semi-structured interviews with twelve midwives who had experienced the credentiailling process. Data were analysed using simple descriptive and thematic analysis.

Findings

The midwives' in the study had similar experiences of undertaking the credentiailling process. Preparation for the process was time-consuming, difficult and stressful. Much of this was because this was a new process introduced into midwifery in NSW and the midwives in the study were among the first midwives ever to undertake the process. The midwives were generous in their praise for the panel review, and were both proud and relieved when awarded the credential. The more contentious findings were that the midwives saw themselves as an 'elite' group who practised at an 'advanced' level and therefore were probably less likely to need their practice reviewed. This led to a general feeling that credentiailling was just 'ticking the box', 'jumping through the hoop' or merely

completing what was required of them rather than something they, or the women they cared for, would benefit from.

Implications for practice

The introduction of credentialling within midwifery was contentious. This was particularly so as it was introduced for one specific group of midwives. The midwives offered several suggestions that they felt would improve the process. These included improving the clarity of information available and providing more practical assistance around preparing for the process. They also felt the experience would mean more if the process was standardised across midwifery.

Standardising the process and applying the process to all midwives would work toward addressing the perceived 'advanced practice' notions that have evolved through targeting only one group of midwives. Although, standardising the process to be applicable to all may be difficult. This is because many midwives currently do not work in a system that provides for ensuring that they all practise in the full role and scope of practise of the midwife.

Glossary of terms and concepts

Competence/competency - the combination of skills, knowledge, attitudes, values and abilities that underpin effective professional performance in the individual's area and context of practice (Australian Nursing and Midwifery Council, 2009)

Continuing competency framework – a structure that exists to assist professionals to systematically evaluate their practise against the relevant professional competency standards in order to identify learning needs and demonstrate continued competence to practise (Australian Nursing and Midwifery Council, 2009)

Continuing professional development (CPD) - post qualification education that aims to actively engage professionals in lifelong learning with the ultimate goal of improving delivery of health care (Griscti & Jacono, 2006).

Continuing professional development framework – a structure that exists to allow professionals to identify, plan, participate in and reflect on relevant professional development activities (Australian College of Midwives, 2007a)

Credentiailling - a process that can be used by health care organisations to verify and evaluate qualifications and the experience of health care professionals. Credentiailling can be attended to prior to appointment, reappointment or at other times. Its purpose is to assist the organisation in forming an opinion about the professional's training, skills, experience and competence (Australian Council for Safety and Quality in Health Care, 2004).

Peer review – a process by which a professional's practise is examined, discussed or critiqued by one or more peers, for the purpose of identifying excellent practise and areas for improvement (Australian Nursing and Midwifery Council, 2009)

Quality and safety in healthcare – a strategic framework based on patient centred healthcare, systemisation of evidence-based practice and a culture of safety (Australian Institute of Health and Welfare, 2009)